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ABSTRACT

Autobiographies are typically included along with self-help books on resource lists for mental health clients. Although first-person narratives may have advantages of reader identification with the protagonist, little research has been done on this issue. One problem is that book categories overlap, e.g., some novels are autobiographical, and some autobiographies have been fictionalized. In view of this overlap, exclusive reliance on any single book type has limited clinical justification. What is needed is an anthology of recent first-person accounts of mental disorders based on the potential benefit of selections for clients and families. Outcome research is required on use of prescribed reading of autobiography during therapy. Another unexplored area of research is the use of a journal by clients in therapy. Ethical issues associated with this are discussed. (JDM)

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by
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# The Use of Autobiography in Psychotherapy

Robert Sommer

## Abstract

Lists of books suitable for mental health clients typically include autobiographies along with self-help books and fiction. Although first-person narratives may have advantages in terms of increased reader identification with a protagonist, there has been little research on this issue and book categories overlap; e.g. some novels are autobiographical, some autobiographies have been fictionalized, and some self-help books were written by clients or family members. In view of this overlap, exclusive reliance on any single book type has limited clinical justification.

During the past decade there has been an increase in the number of descriptions of mood disorder relative to schizophrenia, of therapists going public with a personal experience of mental disorder, and books expressing a positive view of treatment. Norcross et al. (2000) provide a list of autobiographies along with ratings by therapists of their suitability for clients.

## Presentation

Autobiography represents a convergence between the humanities and the behavioral sciences. Psychologists have much to contribute to society's understanding of mental disorder but the humanities also have a role to play. Artists, poets, and novelists may be better able than psychologists to capture grief at the loss of a child, frustration at an inability to quit abusing drugs, or the rigors of life on the streets for a mentally ill person. I have read insider accounts of depression written by psychologists Hobart Mowrer, Norman Endler, and Martha Manning, but none of them in my opinion has the empathy and strength of novelist William Styron's Darkness visible. Autobiography is a hot item for publishers. There is a continuing stream of new accounts mentioning mental disorder,

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sometimes as the major focus of a book, but more often as part of a life story. The books can be found either in the self-help section of a bookstore or in the biography section. From the outset, these books have played a vital role in the origin and development of

Autobiography has played a vital role in the development of the modern self-help movement. Twelve-step programs rely heavily on written and oral testimonials, not only as catharsis for the writer or speaker and shared experience for the audience, but also to demonstrate the author's willingness to admit responsibility for past behavior. An autobiography is not necessarily a self-help book but it can be used within a self-help program or as an adjunct to psychotherapy. Online services allow one to locate books combining biography with mental disorder.

I have been reading first-person accounts of mental disorder for over 40 years. As a mental hospital researcher, I was knowledgeable about many aspects of hospital life, but realized there were some things about which I knew little, including the experience of psychosis. Autobiographies written by patients provided an insider view, not only as to how hospital conditions might appear to me, but as they were experienced and interpreted by individuals with serious disorders. Later I found these books helpful in teaching abnormal psychology (Norcross, Sommer, & Clifford, 2001). Autobiography puts a human face on the disorder. This is not simply DSM Axis 3 or an estimated incidence rate of 1 in 84 people, it is an individual within a family and community context struggling to overcome seemingly overwhelming forces.

While most psychologists know a few classic accounts, such as Clifford Beers A Mind that Found Itself or the Schreber's Memoirs, few are aware that hundreds of these books exist, covering many nations and time periods. There have been at least 15 published bibliographies and anthologies (Sommer, Clifford, & Norcross, 1998). With proper indexing, one could locate autobiographies by diagnosis, vocation, gender, age, and other characteristics. Some are contemporaneous records of events (diaries) while others are memoirs, looking back at a disorder months or years later.

A recent anthology would make their use in psychotherapy a more feasible option. Early collections such as Carney Landis'

(1964) Varieties of psychopathological experience and Bert Kaplan's (1964) Inner world of mental illness are out-of-print. Roy Porter's (1988) compendium is largely of historical value; the chapters dwell upon arbitrary commitment policies, degrading conditions of confinement, occasional instances of brutality, and the use of outdated restraints and treatments. Recent books cover both inpatient and outpatient treatment, rarely mention brutality, describe various types of psychotherapy from the client's viewpoint, and document the maintenance use of drugs such as Prozac ( Elizabeth Wurzel (new); Lauren Slater (new) and lithium (Duke, 1992; Jamison, 1995). More is written today about a disorder's effect on family members and partners. There is also a specific genre combining autobiography with biography that provides a view of the disorder from the standpoint of a family member (Terry, George McGovern's daughter; Nola. Robin Helmlet's sister; Imagining Robert, Jay Neugeboren's brother). I hope can stimulate someone in this audience to compile an anthology of recent first-person accounts of mental disorder based explicitly on the potential benefit of selections for clients and families.

There is need for outcome research on use of prescribed reading of autobiography during therapy. Some books will be of more value to family members than to clients. Accounts of depression may fall into this category. Depressed clients aren't likely to read them and when the depression lifts, the description loses personal relevance.

Several authors who were encouraged to keep journals by their therapists, mention specifically that this activity was of therapeutic benefit. Writing down experiences helped distance them from the crazy aspects of their behavior and gave them a fresh perspective on how their actions appeared to others. A diary can focus attention, improve short-term memory, and provide an archival record of experience that can be reviewed and discussed at various points in therapy. Several studies suggest that writing about traumatic events reduces anxiety (Burt, 1994; Pennebaker, Colder, & Sharp, 1990). This is relatively unexplored research territory. We must systematically assess the effects of writing as well as reading autobiography. Writing in a diary transforms the diarist (Wiener & Rosenwald, 1993).

However, there are ethical issues involving unpublished material, both in terms of asking clients to keep diaries and

using them as part of therapy. Confidentiality must be respected and a client should feel free to record experience and interpretations of events without fear of negative consequences. Family members may discover a personal journal and read it. Diaries are not legally protected and can be subpoenaed during court proceedings. There can be a blurred line between expressed wish recorded in a journal and implied threat that may raise Tarasoff case issues. These are some of the reasons why therapists might prefer, instead of asking clients to maintain journals, to rely upon the many excellent first-person accounts already published.

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